

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>W</i>	<i>7534</i>	<i>08-30-00</i>
O.I.P.E. CLASSIFIER		<i>10</i>	<i>9-5-00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>123</i>	<i>50906</i>	<i>09/30/01</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 -/- ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
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If more than 150 claims or 10 actions  
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